

## **Application Data Sheet**

### **Application Information**

Application number::	To be assigned
Filing Date::	April 28, 2005
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	PROCESS FOR AMPLIFYING NUCLEIC ACIDS
Attorney Docket Number::	40072-0020
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	14
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contractor Grant Numbers::	
Secrecy Order in Parent Appl.?::	

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yasumasa
Middle Name::	
Family Name::	MITANI
Name Suffix::	
City of Residence::	Hiroshima-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Wakunaga Pharmaceutical Co., Ltd., 1624, Shimo-Koutachi, Kouda-Cho, Takata-Gun
City of mailing address::	Hiroshima-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Akio
Middle Name::	
Family Name::	YAMANE
Name Suffix::	
City of Residence::	Hiroshima-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Wakunaga Pharmaceutical Co., Ltd., 1624, Shimo-Koutachi, Kouda-Cho, Takata-Gun
City of mailing address::	Hiroshima-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yuko
Middle Name::	
Family Name::	SHIBATA
Name Suffix::	
City of Residence::	Ibaraki-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Kabushiki Kaisha Dnaform, 8-3-1, Amimachi- Chou, Inashiki-Gun
City of mailing address::	Ibaraki-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yoshihide
Middle Name::	
Family Name::	HAYASHIZAKI
Name Suffix::	
City of Residence::	Ibaraki-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	22-8, Inarimae, Tsukuba-Shi
City of mailing address::	Ibaraki-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

## **Correspondence Information**

Correspondence Customer Number:: 26633

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

Fax Number:

E-Mail address::

## Representative Information

Representative Customer Number::	26633	
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- OR -

Representative Designation::	Registration Number::	Representative Name::

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2002-314776	October 29, 2002	Yes
WIPO	PCT/JP03/13856	October 29, 2003	Yes



## **Assignee Information (#1)**

Assignee name:: Riken  
Street of mailing address:: 2-1, Hirosawa, Wako-Shi  
City of mailing address:: Saitama-Ken  
State or Province of mailing address::  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address::

## **Assignee Information (#2)**

Assignee name::	Kabushiki Kaisha Dnaform
Street of mailing address::	3-35, Mita 1-Chome, Minato-Ku
City of mailing address::	Tokyo-To
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

## Assignee Information (#3)

Assignee name::	Wakunaga Pharmaceutical Co., Ltd.
Street of mailing address::	5-36, Miyahara 4-Chome, Yodogawa-Ku, Osaka-Shi
City of mailing address::	Osaka-Fu
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	